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PATENT &amp; TRADEMARK OFFICE

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## AMENDMENT TRANSMITTAL LETTER

Docket No.  
31978-202807Application No.  
10/822,140-Conf. #no.1168Filing Date  
April 12, 2004Examiner  
Skibinsky, AnnaArt Unit  
1631

Applicant(s): Gardner et al.

Invention: MULTIVARIATE PROFILING OF COMPLEX BIOLOGICAL REGULATORY PATHWAYS

## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

## CLAIMS AS AMENDED

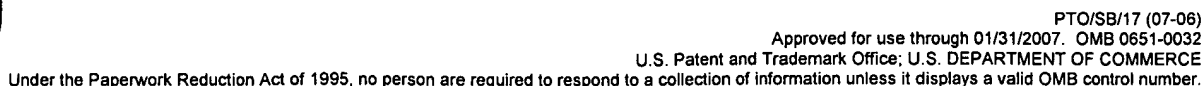
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	21	- 77 =	0	x 50.00	0.00
Independent Claims	1	- 14 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

☒ Large Entity☐ Small Entity☒ No additional fee is required for this amendment.☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 22-0261  
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Nancy J. Axelrod  
 Nancy J. Axelrod  
 Attorney/Agent Reg. No.: 44,014

Dated: November 13, 2006

VENABLE LLP  
 P.O. Box 34385  
 Washington, DC 20043-9998  
 (202) 344-4000



# FEE TRANSMITTAL

## For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b>	<b>0.00</b>
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**Complete if Known**

Application Number	10/822,140-Conf. #no.1168
Filing Date	April 12, 2004
First Named Inventor	Kevin L. Gardner
Examiner Name	Skibinsky, Anna
Art Unit	1631
Attorney Docket No.	31978-202807

**METHOD OF PAYMENT** (check all that apply)

☐ Check   
 ☐ Credit Card   
 ☐ Money Order   
 ☐ None   
 ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account   
 Deposit Account Number: 22-0261   
 Deposit Account Name: **Venable LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

2. EXCESS CLAIM FEES		Small Entity
Fee Description	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>
21	-57 =	0	x	50.00	=	0.00

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
1	- 14 = 0	x 200.00	= 0.00

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50	(round up to a whole number) x	=	

#### 4. OTHER FEE(S)

**Non-English Specification, \$130 fee (no small entity discount)**

Other (e.g., late filing surcharge):

## SUBMITTED BY

Signature	<i>Nancy Axelrod</i>	Registration No. (Attorney/Agent)	44,014	Telephone	(202) 344-4000
Name (Print/Type)	Nancy J. Axelrod			Date	November 13, 2006



PATENT  
Attorney Docket No.: 31978-202807

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:  
Kevin L. GARDNER et al.

Application No.: 10/822,140

Filed: April 12, 2004

For: MULTIVARIATE PROFILING OF  
COMPLEX BIOLOGICAL REGULATORY  
PATHWAYS

Confirmation No.: 1168

Art Unit: 1631

Examiner: Skibinsky, Anna

Attorney Docket No. 31978-202807

Customer No.

**45323**

PATENT TRADEMARK OFFICE

**REPLY**

Assistant Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA. 22313-1450

Sir:

In response to the Office Action mailed on August 11, 2006, in the above-referenced application, please amend the application and consider the remarks that follow.

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** begin on page 3 of this paper.

**Remarks** begin on page 9 of this paper.